UNITED STATES BANKRUPTCY COURT
DISTRICT OF MASSACHUSETTS

CHAPTER 13 PLAN COVER SHEET

Filing Date: **04/06/2007**

Docket #: ______

Debtor: **Sonja Brookins Santelises**

Co-Debtor: ______

Address: **700 Huron Avenue #7D**
Cambridge, MA 02138

Address: ______

Debtor's Counsel: **Wendy Manz**

Address: **Law Office of Wendy Manz**
5 Militia Drive
Lexington, MA 02421

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ATTACHED TO THIS COVER SHEET IS THE CHAPTER 13 PLAN FILED BY THE DEBTOR(S) IN THIS CASE. THIS PLAN SETS OUT THE PROPOSED TREATMENT OF THE CLAIMS OF CREDITORS. THE CLAIMS ARE SET FORTH IN THE BANKRUPTCY SCHEDULES FILED BY DEBTOR(S) WITH THE BANKRUPTCY COURT.

YOU WILL RECEIVE A SEPARATE NOTICE FROM THE BANKRUPTCY COURT OF THE SCHEDULED CREDITORS' MEETING PURSUANT TO 11 U.S.C. §341. THAT NOTICE WILL ALSO ESTABLISH THE BAR DATE FOR FILING PROOFS OF CLAIMS.

PURSUANT TO THE MASSACHUSETTS LOCAL BANKRUPTCY RULES, YOU HAVE UNTIL FIFTEEN (15) DAYS AFTER THE SECTION 341 MEETING TO FILE AN OBJECTION TO CONFIRMATION OF THE CHAPTER 13 PLAN, WHICH OBJECTION MUST BE SERVED ON THE DEBTOR, DEBTOR'S COUNSEL AND THE CHAPTER 13 TRUSTEE.

UNITED STATES BANKRUPTCY COURT
DISTRICT OF MASSACHUSETTS

CHAPTER 13 PLAN

Docket #: ____________________

DEBTORS: (H) **Sonja Brookins Santelises** SS# **6191**

TERM OF THE PLAN: **36** Months (If the plan is longer than thirty-six (36) months and debtor's plan is governed by 11 U.S.C § 1322 (d)(2), a statement of cause under must be attached hereto.)

PLAN PAYMENT: Debtor(s) to pay monthly: $ **1,451.25**

I. SECURED CLAIMS

A. Claims to be paid through the plan (including arrears):

Creditor	Description of Claim (pre-petition arrears, purchase money, etc.)	Amount of claim
NONE		$

Total of secured claims to be paid through the Plan: $ ____________

B. Claims to be paid directly by debtor to creditors (Not through Plan):

Creditor	Description of Claim
NONE	

II. PRIORITY CLAIMS

A. Domestic Support Obligations:

Creditor	Description of claim	Amount of claim
NONE		$

B. All Other Priority Creditors:

Creditor	Description of claim	Amount of claim
Internal Revenue Service	**2004, 2005 income taxes**	$ **10,070.00**
Massachusetts Department of Revenue	**2004, 2005 income taxes**	$ **3,117.00**

Total of Priority Claims to Be Paid Through the Plan: $ **13,187.00**

III. ADMINISTRATIVE CLAIMS

A. Attorneys fees **(to be paid through the plan):** $ **0.00**

B. Miscellaneous fees:

Creditor	Description of claim	Amount of claim
NONE		$

C. The Chapter 13 Trustee's fee is determined by Order of the United States Attorney General. The calculation of the Plan payment set forth utilizes a 10% Trustee's commission.

IV. UNSECURED CLAIMS

The general unsecured creditors shall receive a dividend of **16.27** % of their claims.

A. General unsecured claims $ **227,705.00**

B. Undersecured claims arising after lien avoidance/cramdown:

Creditor	Description of claim	Amount of claim
NONE		$

C. Non-Dischargeable Unsecured Claims:

Creditor	Description of claim	Amount of claim
NONE		$

Total of A + B + C unsecured claims: = $ **227,705.00**

D. **Multiply total by percentage:** $ **37,047.60**

E. Separately classified unsecured claims (co-borrower, etc.):

Creditor	Description of claim	Amount of claim
NONE		$

Total amount of separately classified claims payable at ______ % $ ______

V. OTHER PROVISIONS:

A. Liquidation of assets to be used to fund plan:______

B. Modification of Secured Claims: Set forth details of modifications below or on attached sheets. This information should include name of creditor and detailed explanation of the modification. The total amount of the secured claim that is to be paid through the plan (inclusive of interest) should be set forth in Section I of this Plan.

Creditor	Modification	Amount secured claim
NONE		$

C.. Assumption/Rejection of Leases:

Creditor	Description of claim	Assumption
Parkside Place	**One year lease on apartment at 700 Huron Avenue, Cambridge, MA**	
Herb Chambers Honda	**Lease of 2005 Honda Accord automobile**	**Assumed**

D. Miscellaneous Provisions:

CALCULATION OF PLAN PAYMENT

a) **Secured claims (Section I-A Total):**	$	**0.00**
b) **Priority claims (Section II-A & B Total):**	+$	**13,187.00**
c) **Administrative claims (Section III-A&B Total):**	+$	**0.00**
d) **Regular unsecured claims (Section IV-D Total):**	+$	**37,047.60**
e) **Separately classified unsecured claims:** ***(Section IV-E Total)***	+$	**0.00**
f) **Total of a + b + c + d + e above:**	=$	**50,234.60**
g) **Divide (f) by .90 for total including Trustee's fee: Cost of Plan**	=$	

(This represents the total amount to be paid into the Chapter 13 Plan.)

h) **Divide (g) Cost of Plan by Term of plan:**	÷	months
I) **Round up to nearest dollar: Monthly Plan Payment**	=$	**1,451.25** *(Enter this amount on page 1)*

Pursuant to **11 U.S.C. §1326(a)(1)** unless the Court orders otherwise, debtor shall commence making the payments proposed by a plan within thirty (30) days after the petition is filed. Pursuant to 11 U.S.C. §1326(a)(1)(C), the debtor shall make preconfirmation adequate protection payments directly to the secured creditor.

LIQUIDATION ANALYSIS

I. Real Estate:

List Each Address	Fair Market Value	Total Amount of Recorded Liens (Schedule D)
NONE	$	$

Total Net Equity for Real Property: $

Less Total Exemptions (Schedule C): $

Available Chapter 7: $ **0.00**

II. Automobile (Describe year, make, model):

NONE Value $ **0.00** Lien $ **0.00** Exemption $ **0.00**

Total Net Equity: $

Less Total Exemptions (Schedule C): $

Available Chapter 7: $ **0.00**

III. All Other Assets (All remaining items on Schedule B): (Itemize as necessary)

Value: $ **21,934.28** Less Exemptions (Schedule C): $ **23,934.28**

Total Net Equity: $ **21,934.28**

Less Total Exemptions (Schedule C): $ **23,934.28**

Available Chapter 7: $ **0.00**

SUMMARY (Total amount available under chpater 7):

Net Equity (I and II) Plus Other Assets (III) less all claimed exemptions: $ **5,000.00**

Additional Comments regarding Liquidation Analysis:

Pursuant to the Chapter 13 rules, the debtor or his or her counsel is required to serve a copy of the Plan upon the Chapter 13 Trustee, all creditors and interested parties, and to file a Certificate of Service accordingly.

/s Wendy Manz **8/10/2007**
Wendy Manz Date
Debtor's Counsel

Counsel's Address: **Law Office of Wendy Manz**
5 Militia Drive
Lexington, MA 02421

Tele. # **(781) 863-1611** Email Address: **wendy_manz@manzlaw.com**

I/WE DECLARE UNDER THE PENALTIES OF PERJURY THAT THE FOREGOING REPRESENTATIONS OF FACT ARE TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF.

s/ Sonja Brookins Santelises **8/10/2007**
Sonja Brookins Santelises Date
Debtor